



**STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Aging and Disability Services
Aging and Long-Term Support Administration
PO Box 45600, Olympia, WA 98504-5050**

March 27, 2013

CERTIFIED MAIL 7007 1490 0003 4201 3865

Administrator
Rosetta Assisted Living, Fisher
520 N Fisher Street
Kennewick, WA 98336

Assisted Living Facility License #1526
Licensee: Americare LLC

**IMPOSITION OF CONDITIONS ON A LICENSE
AND CONTINUED STOP PLACEMENT**

Dear Administrator:

This letter constitutes formal notice of imposition of stop placement and conditions on license for your assisted living facility located at **520 N Fisher Street, Kennewick, Washington** by the State of Washington, Department of Social and Health Services. This action is taken under the authority granted in the Laws of 1998, Chapter 272; RCW 18.20.190.

The stop placement of admissions to your assisted living facility, are based on violations of the Revised Code of Washington (RCW) and Washington Administrative Code (WAC) found by the department at your boarding home. These and other deficiencies are more fully described in the attached Statement of Deficiencies report completed by the department on March 8, 2013.

The imposition of conditions on a license is based on the following violations of the Revised Code of Washington (RCW) and Washington Administrative Code (WAC) found by the department at your assisted living facility. These and other deficiencies are more fully described in the attached Statement of Deficiencies report completed by the department on March 8, 2013.

WAC 388-78A-2100(2)(a)(b)(c) On-going assessments.

The assisted living facility failed to ensure assessments were completed that focused on residents' identified problems and related issues following resident changes.

This is a repeated deficiency previously cited on March 23, 2012

WAC 388-78A-2140(1)(a)(i)(ii)(iii)(d)(e)(2)(a) Negotiated service agreement contents.

The assisted living facility failed to develop a plan to monitor and address interventions for current risks in order to provide necessary health support services for three residents.

WAC 388-78A-2160 Implementation of negotiated service agreement

The assisted living facility failed to provide adequate supervision, bathing, weights and vital sign check as agreed upon in the individualized negotiated service agreement for four residents.

WAC 388-78A-2210(2)(a) Medication services

The assisted living facility failed to ensure residents received medications as prescribed for two residents.

WAC 388-78A-2600(2)(a)(j)(i)(ii) Policies and procedures

The assisted living facility failed to ensure staff implemented facility policies and procedures addressing what staff persons must do related to suspected abuse or neglect of any resident.

WAC 388-78A-2660(1) Resident Rights

The assisted living facility failed to protect the resident's right to be free of physical or mental abuse, neglect, and/or involuntary seclusion for three residents.

WAC 388-78A-2700(1)(2)(c)(i)(ii)(iii) Safety measures and disaster preparedness

The assisted living facility failed to investigate and document investigative actions and findings to rule out abuse or neglect.

The department, based on the findings of the inspection, has determined that the following condition(s) shall be placed on your license:

- *The licensee must hire a nurse consultant, not associated with the facility, to:*
 1. *Assist the administrator review, make necessary revisions, and implement an abuse policy, including but not limited to preventing, identifying, and investigating abuse.*
 2. *Assist the administrator implement a system to ensure thorough investigations.*

3. *Assist the administrator to developing and implement a safe medication system including a quality review process for missed medications and actions to prevent reoccurrence.*
 4. *Monitoring residents for health care issues and changes of condition.*
 5. *Assist the administrator in ensuring all staff are trained.*
 6. *Assist the administrator to ensure all residents are reassessed to ensure all resident injuries/conditions are identified, assessed and negotiated service agreements are up to date related to resident conditions.*
- *The licensee will provide a copy of the 3/8/13 Statement of Deficiencies to the nurse consultant.*
 - *The nurse consultant will be available to answer questions by the department.*
 - *The consultant must be hired by 4/2/13.*
 - *Assessments must be completed by April 21, 2013.*
 - *The licensee will post the license with the enclosed Notice of Conditions of Operation in the ALF in a location accessible to residents and visitors.*

On March 6, 2013 the department verbally imposed a stop placement order prohibiting admissions pending completion of investigation. On **March 8, 2013** the investigation was completed and your facility failed to be in compliance with all WAC and /or RCW. The stop placement order imposed on March 6, 2013, remains in effect.

In your March 6, 2013 notice of imposition stop placement order prohibiting admissions you were notified of your right to request an administrative hearing. This Notice does not change or extend the deadline date to appeal this action. Refer to that notice for information as to how and when to appeal.

The effective date of the condition on your license is March 21, 2013. As provided in RCW 18.20.190, the effective date of the condition on your license will not be postponed pending an administrative hearing or informal dispute resolution review.

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You may contest this condition on your license by requesting an administrative hearing. To do so, the Office of Administrative Hearings must receive your written request for a hearing within twenty-eight (28) calendar days following your receipt of this letter. A copy of this letter and a copy of the enclosed Statement of Deficiencies must be included with your request. Send your request to:

**Office of Administrative Hearings
PO Box 42489
Olympia, Washington 98504-2489**

As provided in RCW 18.20, you may request an informal dispute resolution review of enforcement actions initiated in response to a Statement of Deficiencies report. During the informal dispute resolution process you also have the right to present written evidence refuting this action. A request for informal dispute resolution review will not change the deadline for you to request an administrative hearing. Informal dispute resolution review by the department is not binding in an administrative hearing.

To request an informal dispute resolution review, send your written request to:

**Informal Dispute Resolution Program Manager
Aging and Disability Services Administration
PO Box 45600
Olympia, Washington 98504-5600
Fax (360) 438-7903**

The written request should:

- Identify the citation and/or enforcement action that is disputed;
- Explain why you are disputing the action;
- Indicate the type of dispute resolution process you prefer (direct meeting, telephone conference or documentation review); and,
- Be sent within 10 working days of your receipt of this notice.

Plan of Correction/Attestation

You must:

Return the plan/attestation, on the enclosed report, within **10 calendar days** after you receive this letter. Include the following in your plan for each deficiency:

- The date you have or will correct each deficiency; and
- Provide a signature and date certifying that you have or will take corrective measures to correct each cited deficiency. Send your Plan of Correction to:

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Jo Whitney, Field Manager
RCS District 1 Unit C
3611 River Road, Suite 200
Yakima, WA. 98902
Phone (509) 225-2823 / Fax (509) 454-7890

If you have any questions, please contact Jo Whitney at (509) 225-7890.

Sincerely,

Lori Melchiori, Ph.D.
Assistant Director
Residential Care Services

Enclosure:

cc: Robert Ogolsky, Compliance Specialist
RCS Field Manager – District 1 Unit C
RCS District Administrator – District 1
HCS Regional Administrator – Region 1
DDD Regional Administrator – Region 1
Washington State Long Term Care Ombudsman
Area Agency on Aging, AAA- East
Medicaid Fraud Control Unit
Judi Plesha, HCS
HQ Central Files

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